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TMC EXAM LATEST 2023-2024 ACTUAL EXAM TEST BANK 400 QUESTIONS AND CORRECT DETAILED ANSWERS WITH RATIO NALES (VERIFIED ANSWERS) |ALREADY GRADED A+

A 60 kg (132 lb) patient is being mechanically ventilated with the following settings: VC, A/C; VT 500 mL, respiratory rate 12/min, FIO2 1.00 and 10 cm H2O PEEP. The patient's peak airway pressure is 60 cm H2O and his SpO2 is 85%. A current chest x-ray shows diffuse bilateral infiltrates. Which of the following is the most appropriate action in order to reduce peak airway pressure?

A. Increase the frequency.

B. Change to airway pressure release ventilation.

C. Decrease the inspiratory time.

D. Increase PEEP to 15 cm H2O. - ANSWER- Change to airway pressure release ventilation.

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In order to verify the accuracy of a lab-based spirometer device, the respiratory therapist should utilize a

A. rotameter.

B. 3.0 L syringe.

C. Wright respirometer.

D. pneumotachometer. - ANSWER- 3.0 L syringe.

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While performing diagnostic chest percussion, the respiratory therapist notes decreased resonance to percussion. Which of the following are potential causes of this finding?

1. pneumothorax
2. pleural effusion
3. pneumonia
4. atelectasis - ANSWER- 2, 3, and 4 only

A 19-year-old patient is brought to the emergency department after taking a handful of pills. The patient is obtunded but is making regular, sonorous respiratory efforts. Auscultation reveals coarse rhonchi bilaterally. Which of the following should be done FIRST to assess this patient?

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A. Obtain a sputum specimen.

B. Obtain an ABG.

C. Measure peak expiratory flow.

D. Determine the Glasgow Coma Score. - ANSWER- Obtain an ABG.

A 60 year-old male is admitted to the ED with chest pain. The CBC and electrolytes are normal. Troponin level is 0.4 ng/mL. The physician should report to the patient that he is suffering from

A. pulmonary embolism.

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B. gastroesophageal reflux.

C. myocardial infarction.

D. valvular stenosis. - ANSWER- myocardial infarction.

A young healthy adult with complaints of intermittent wheezing is seen in the pulmonary clinic. A pre/post bronchodilator spirometry reveals a normal study with no reversibility. Which of the following should the RT recommend?

A. Helium dilution study

B. DLCO

C. Plethysmography

D. Bronchial provocation - ANSWER- Bronchial provocation

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Twenty-four hours after a patient was intubated, she develops a fever of 99.9°F, a right lower lobe infiltrate, and her white blood cell count is 12,000 per mm3. The respiratory therapist should recommend

A. antiviral therapy.

B. blood transfusion.

C. SABA by small volume nebulizer.

D. antibiotic therapy. - ANSWER- antibiotic therapy.

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A tracheostomy tube has just been inserted percutaneously into a patient with a C3 fracture. How much air should the respiratory therapist initially inject into the cuff?

A. Enough to achieve a pressure of 25-35 cmH2O.

B. Enough to achieve a minimal occluding volume.

C. A minimum of 20 mL.

D. Until firm tension is felt in the pilot balloon. - ANSWER- Enough to achieve a pressure of 25-35 cmH2O.

All of the following conditions can be treated with hyperbaric oxygen (HBO) therapy EXCEPT

A. carbon monoxide poisoning.

B. decompression sickness.

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C. anaerobic infections.

D. pulmonary hypertension. - ANSWER- pulmonary hypertension.

Which of the following factors are determinants of cardiac output?

A. ventricular filling and heart rate

B. stroke volume and heart rate

C. stroke volume and respiratory rate

D. heart rate and tidal volume - ANSWER- stroke volume and heart rate

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